## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence access and notification of maintenance fees will be mailed to the current correspondence access as

indicated unless correcte maintenance fee notifica		herwise in Block 1, by (	a) specifying a new con	espondence address	; and/or (	b) indicating a sepa	rate "FEE ADDRESS" for	
CURRENT CORRESPOND	N Fe pa	Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
22242	7590 09/30	0/2009	na					
FITCH EVEN 120 SOUTH LA SUITE 1600	l i St ac tra	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
CHICAGO, IL 6	50603-3406		(Depositor's name)					
						<del></del>	(Signature)	
							(Date)	
APPLICATION NO.	CATION NO. FILING DATE		FIRST NAMED INVENTO	ATTO		IEY DOCKET NO.	CONFIRMATION NO.	
10/568,323	07/11/2007		adimir Nikolaevich And	r Nikolaevich Andoskin		382-87382	4616	
TITLE OF INVENTION DRILLING BIT IN A BE		ANGLE AND REACTIVIG	VE MOMENT OF A G	EROTOR TYPE M	OTOR H	(AVING A SPIND	LE AND	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSU	e fee	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	<b>\$</b> 755	\$300	\$0	<del>-</del>	\$1055	12/30/2009	
EXAM	EXAMINER		CLASS-SUBCLASS	7				
WRIGHT, GIOVANNA COLLINS		3672	175-074000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			i ' -	2. For printing on the patent front page, list FITCH, EVEN, TABIN				
	ondence address (or Cha 3/122) attached.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.					
		A TO BE PRINTED ON						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
OBSCHESTVO S OGRANICHENNOI PERM, RUSSIAN FEDERATION OTVETSTVENNOSTYU'TIRMA "RADIUS-SERVIS"								
Please check the appropri	ate assignee category or	categories (will not be pr	inted on the patent):	Individual 🖾 Co	orporation	or other private gro	oup entity Government	
Ha. The following fce(s) are submitted:  4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)								
Issuc Fcc		A check is chclosed.						
	o small entity discount p	<ul> <li>□ Payment by credit card. Form PTO-2038 is attached.</li> <li>□ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 06-1135 (enclose an extra copy of this form).</li> </ul>						
Advance Order - #	of Copics		overpayment, to Dep	osit Account Numb	er <u>06 – 1</u>	L135 (enclose a	n extra copy of this form).	
	us (from status indicated		b. Applicant is no lo	nas alaimina SMA	II ENTIT	TV etable Sec 37 Cl	FR 1 27(a)(2)	
☐ a. Applicant claims	SMALL ENTITY statu	is. See 3/ CFR 1.2/.						
nterest as shown by the r	ecords of the United Sta	tes Patent and Trademark	Office.	the approant, a regi	- and	sincy of agoin, of the	e assignec or other party in	
Authorized Signature	Che K	2Km		Date Dec	embe	r 29, 200	9	
Typed or printed name				Registration N				
in application. Confident iubmitting the completed his form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231	iality is governed by 35 application form to the ons for reducing this bur irginia 22313-1450. DO 3-1450.	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR Corrons are required to response are required to response to the sent of the sent to	depending upon the independing upon the independing upon the independent of the complete of th	stimated to take 12 sividual case. Any cocer, U.S. Patent and FO THIS ADDRESS	minutes to omments of Trademar S. SEND	on the amount of tirk Office, U.S. Departs:  O: Commissioner	by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, number.	